

JC525 U.S. PTO



01/16/02

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PTO/SB/05 (12/97)

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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	ITWO:0026	Total Pages	32
<i>First Named Inventor or Application Identifier</i>			
<i>Stephen R. Dohm</i>			
<i>Express Mail Label No.</i>		<i>EV 017 056 879 US</i>	

APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents.</i>		Assistant Commissioner for Patents Box Patent Application Washington, DC 20231	
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form <i>(Submit an original, and a duplicate for fee processing)</i></p> <p>2. <input checked="" type="checkbox"/> Specification Total Pages 15 <i>(preferred arrangement set forth below)</i></p> <ul style="list-style-type: none"> -Descriptive -Cross References to Related Application -Statement Regarding Fed sponsored R & D -Reference to Microfiche Appendix -Background of the Invention -Brief Summary of the Invention -Brief Description of the Drawings <i>(if filed)</i> -Detailed Description -Claim(s) -Abstract of the Disclosure <p>3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) Total Sheets 3 Total Pages 9</p> <p>4. Oath or Declaration</p> <ul style="list-style-type: none"> a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37CFR 1.63(d)) <i>(for continuation/divisional with Box 17 completed) (Note Box 5 below)</i> <p>i. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>5. <input type="checkbox"/> Incorporation By Reference <i>(useable if Box 4b is checked)</i> The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.</p>	<p>6. <input type="checkbox"/> Microfiche Computer Program <i>(Appendix)</i></p> <p>7. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i></p> <ul style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy <i>(identical to computer copy)</i> c. <input type="checkbox"/> Statement verifying identity of above copies 		
ACCOMPANYING APPLICATION PARTS			
<p>8. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(where there is an assignee)</i></p> <p>10. <input type="checkbox"/> English Translation Document <i>(if applicable)</i></p> <p>11. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 <input type="checkbox"/> Citations</p> <p>12. <input type="checkbox"/> Preliminary Amendment</p> <p>13. <input type="checkbox"/> Return Receipt Postcard (MPEP 503)</p> <p>14. <input type="checkbox"/> Small Entity <input type="checkbox"/> Statement filed in prior application Statement(s) Status still proper and desired</p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i></p> <p>16. <input checked="" type="checkbox"/> Other PTO-2038</p>			
17. <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: _____ / _____			

18. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label	<input type="checkbox"/> Correspondence address below (Insert Customer No. or Attach bar code label here)					
NAME		Patrick S. Yoder				
		Fletcher, Yoder & Van Someren				
ADDRESS		P.O. Box 692289				
CITY		Houston	STATE	Texas	ZIP CODE	77269-2289
COUNTRY		USA	TELEPHONE	(281) 970-4545	Fax	(281) 970-4503

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

FEE TRANSMITTAL

		Complete if Known	
		Application Number	Unassigned
		Filing Date	Herewith
		First Named Inventor	Stephen R. Dohm
		Group Art Unit	
		Examiner Name	
TOTAL AMOUNT OF PAYMENT	(\$) 1,128.00	Attorney Docket Number	ITWO:0026/YOD

METHOD OF PAYMENT (check one)		FEE CALCULATION (continued)			
1. <input type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to: Deposit Account Number <u>06-1315/ITWO:0026/YOD</u>		3. ADDITIONAL FEES			
Deposit Account Name Fletcher, Yoder & Van Someren		Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)
<input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing of the Notice of Allowance, 37 CFR 1.31(b)		105	130	205	65
		127	50	227	25
		139	130	139	130
		147	2,520	147	2,520
		112	920*	112	920*
		113	1,840*	113	1,840*
		115	110	215	55
		116	400	216	200
		117	950	217	475
		118	1,570	218	755
		119	310	219	155
		120	310	220	155
		121	270	221	135
		138	1,510	138	1,510
		140	110	240	55
		141	1,320	241	660
		142	1,320	242	660
		143	450	243	225
		144	670	244	335
		122	130	122	130
		123	50	123	50
		126	240	126	240
		581	40	581	40
		146	790	246	395
		149	790	249	395
		Other fee (specify)			
		Other fee (specify)			
		SUBTOTAL (3) (\$) * Reduced by Basic Filing Fee Paid			
2. <input checked="" type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Other		PTO-2038			
FEE CALCULATION (fees effective 10/01/01)					
1. FILING FEE					
Large Entity		Small Entity			
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
101	710	201	355	Utility filing fee	<u>740.00</u>
106	330	206	165	Design filing fee	—
107	540	207	270	Plant filing fee	—
108	790	208	395	Reissue filing fee	—
114	150	214	75	Provisional filing fee	—
SUBTOTAL (1)				(\$) <u>740.00</u>	
2. CLAIMS					
Large Entity		Small Entity			
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
Total Claims 30 -20 =	<u>10</u>	X	<u>18</u>	=	<u>180.00</u>
Independent 5 - 3 =	<u>2</u>	X	<u>84</u>	=	<u>168.00</u>
Claims					
Multiple Dependent Claims	<u>0</u>	X	<u>0</u>	=	<u>0</u>
Large Entity		Small Entity			
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
103	18	203	9	Claims in excess of 20	—
102	80	202	40	Independent claims in excess of 3	—
104	270	204	135	Multiple dependent claim	—
109	82	209	41	Reissue independent claims over original patent	—
110	22	210	11	Reissue claims in excess of 20 and over original patent	—
SUBTOTAL (2)				(\$) <u>348.00</u>	

SUBMITTED BY		Complete (if applicable)		
Typed or Printed Name	Ralph A. Graham	Reg. Number	47,607	
Signature		Date	January 16, 2002	Deposit Acct. User ID